PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents 232006 P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885 or Fax INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where representations. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as madeated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must 22930 7590 11/02/2005 have its own certificate of mailing or transmission. **HOWREY LLP** Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. C/O IP DOCKETING DEPARTMENT 2941 FAIRVIEW PARK DR, SUITE 200 **FALLS CHURCH, VA 22042-2924** (Depositor's name) 01/24/2006 MBEYENE2 00000100 083038 10603089 (Signature) '01 FC:1501 1400.00 DA (Date 02 FC:1504 300.00 DA 03 FQ:80X PLICATION NO: 00 PA FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/603.089 06/25/2003 Patrick C. Jackanich 05002.0002.NPUS00 1916 TITLE OF INVENTION: NOVELTY HAT APPLN. TYPE ISSUE FEE SMALL ENTITY PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE NO \$1400 02/02/2006 nonprovisional \$300 \$1700 EXAMINER ART UNIT CLASS-SUBCLASS TOMPKINS, ALISSA JILL 3765 002-195100 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CFR 1.363) HOWREY LLP (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE The Motor-Head Project, Ltd. Houston, Texas ☐ Individual ☐ Corporation or other private group entity ☐ Government Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): lssue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to posit Account Number \_\_\_\_\_\_08\_3038\_\_\_\_ (enclose an extra copy of this form). Advance Order - # of Copies \_ Ten (10) 5. Change in Entity Status (from status indicated above) ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Date

January 23, 2006

39,604

PTO/SB/21 (09-04)

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BARRIE		Application Number	10	/603,089					
TRANSMITTAL	Filing Date	06	/25/2003						
FORM	First Named Inventor	Pa	trick C. Jackanich						
(to be used for all correspondence after initial filing)		Art Unit	37	65					
	Examiner Name	To	Tompkins, Alissa Jill						
Total Number of Pages in This Submission	3	Attorney Docket Number	05	002.0002.NPUS00					
ENCLOSURES (Check all that apply)									
Fee Transmittal Form		Drawing(s)		After Allowance Communication to TC					
Fee Attached		icensing-related Papers		Appeal Communication to Board of Appeals and Interferences					
Amendment/Reply		etition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)					
After Final		etition to Convert to a rovisional Application		Proprietary Information					
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address		Status Letter					
Extension of Time Request	l	Terminal Disclaimer		Other Enclosure(s) (please Identify below):					
Express Abandonment Request		Request for Refund		Issue Fee Transmittal (In Duplicate)					
Information Disclosure Statement		D, Number of CD(s)							
Certified Copy of Priority Document(s)	Rema	Landscape Table on CD							
Response to Missing Parts/									
Incomplete Application  Response to Missing Parts									
under 37 CFR 1.52 or 1.53									
	TURE OF	APPLICANT, ATTORNEY	, OR A	GENT					
Firm Name HOWREY LLP									
Signature / // // // // // // //	1								
Printed name Michael J. Bel									
Date January 27, 2006			Reg. No.	39,604					
CERTIFICATE OF TRANSMISSION/MAILING									
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Signature			•						
Typed or printed name	<del></del>			Date					

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PTO/SB/17 (12-04v2)

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Effe	ective on 12/08/	/2004.		Complete If Known				
		V2004. riations Act, 2005 (H.R. 4818	8). Application Number	10/603,0	10/603,089			
FEE TR	LANS	MITTAL	Filing Date	06/25/20	003			
for FY 2005			First Named Inventor		Patrick C. Jackanich			
		105	Examiner Name		Tompkins, Alissa Jill			
Applicant claims small	entity status.	See 37 CFR 1.27	Art Unit	3765				
TOTAL AMOUNT OF PA	AYMENT	(\$)1730	Attorney Docket No.		05002.0002.NPUS00			
METHOD OF PAYMEN	MT (check al							
	,				<u>.</u>			
Check Credit	t Card	Money Order No	one Other (please	e identify):				
Deposit Account	Deposit Accour	nt Number: <u>08-3038</u>	Deposit Accou	ınt Name:				
		t account, the Director is h			')			
Charge fee(s	s) indicated be	wols	Charge fee(s	s) indicated belo	w, except for the	e filing fee		
Charge any a	additional fee(s	s) or underpayments of fe	e(s) 🔽	•	w, except for the	illing ice		
under 37 CFR	R 1.16 and 1.1	17 become public. Credit card	Credit any o	overpayments	form Provide cres	dit saed		
information and authorization	on on PTO-203	18.	IIIOI III duoii Siloulu IIo. Se	IllCiuueu on ana	IOIII. FIOVIGE CIEG	III Garu		
FEE CALCULATION								
1. BASIC FILING, SEA	ARCH, AND	EXAMINATION FEES	3					
	FILING FEES SEAF		ARCH FEES	CH FEES EXAMINATION FEES				
A II Gam Toma	•	Small Entity	Small Entity		Small Entity			
Application Type Utility	Fee (\$)	Fee (\$) Fee		Fee (\$)	Fee (\$)	Fees Paid (\$)		
•	300		250	200	100			
Design	200		50	130	65			
Plant	200		00 150	160	80 _			
Reissue	300		00 250	600	300 _			
Provisional	200	100	0 0	0	0 _			
2. EXCESS CLAIM FE	EES				_	mall Entity		
Fee Description	to the Det				Fee (\$)	Fee (\$)		
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Multiple dependent clai <u>Total Claims</u>	aims Extra Cla	aims Fee (\$)	Econ Boid (\$)		360	180		
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HP = highest number of total of					******			
Indep. Claims	Extra Cla		Fees Paid (\$)					
- 3 or HP		x =						
HP = highest number of indep	pendent claims							
3. APPLICATION SIZE								

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

**Total Sheets** 

**Extra Sheets** Number of each additional 50 or fraction thereof Fee Paid (\$) (round up to a whole number)

Non-English Specification, \$130 fee (no small entity discount)

4. OTHER FEE(S)

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Fee Paid (\$)

1730.00

SUBMITTED BY			$\Gamma$	1_	71		
Signature			Ŋ	$\prod$	Ma/	Registration No. 39,604 (Attorney/Agent)	Telephone 202.383.6500
Name (Print/Type	Mi	chael J.	BÉ	-	000		Date January 23, 2006

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